

**REMARKS**

Claims 1, 4, 5, and 7 – 13 have been examined. Claim 4 has been identified as allowable except for its dependence from a rejected base claim, and the remaining claims stand rejected under 35 U.S.C. §103(a) as unpatentable over U.S. Pat. No. 5,692,498 in view of U.S. Pat. No. 5,588,422. The rejections are respectfully traversed.

The rejections rely on the disclosure of U.S. Pat. No. 5,692,498 for the claim limitation of “lowering the intrathoracic pressure by spontaneous breathing of the patient while preventing or inhibiting respiratory gas flow to the lungs with the valve system to cause blood to flow into the thorax and thereby increasing vital organ perfusion to enhance circulation of the drug” (Office Action, p. 3). The Office Action cites Col. 13, ll. 8 – 24 of U.S. Pat. No. 5,692,498 for this limitation, but the cited language describes only the use of a valving system during the administration of CPR. Applicants respectfully disagree that the reference teaches “spontaneous breathing of the patient” during the administration of CPR, and believes the statement that “it should be noted that there would be some spontaneous breathing by the patient either through the nose or mouth” (Office Action, p. 2) is incorrect.

CPR is administered in response to cardiac arrest of the patient (*see, e.g.*, U.S. Pat. No. 5,692,498, Col. 1, ll. 22 – 33). One symptom of cardiac arrest is an inability for the patient to breathe spontaneously. Some discussion of this symptom is provided in the '498 patent at, *e.g.*, Col. 1, ll. 44 – 51, and Applicants supply further evidence of this symptom in Exhibit A, which is a copy of *The Merck Manual – Second Home Edition*, Section 24, Chapter 299 (Merck Research Laboratories, 2003). In relevant part, this publication notes that during cardiac arrest “the heart does not beat and breathing ceases” (emphasis added) and that “[a] person in cardiac arrest lies motionless without breathing” (emphasis added).

Accordingly, the cited portion of U.S. Pat. No. 5,692,498 related to the use of a valving system during the administration of CPR neither teaches nor suggests lowering the intrathoracic pressure “by spontaneous breathing of the patient” as the claims require.

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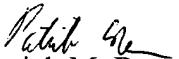
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**CONCLUSION**

In view of the foregoing, Applicants believe all claims now pending in this Application are in condition for allowance. The issuance of a formal Notice of Allowance at an early date is respectfully requested.

If the Examiner believes a telephone conference would expedite prosecution of this application, please telephone the undersigned at 303-571-4000.

Respectfully submitted,

  
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